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## BIB DATA SHEET

CONFIRMATION NO. 7244

<b>SERIAL NUMBER</b> 10/593,052	<b>FILING or 371(c) DATE</b> 06/05/2007 <b>RULE</b>	<b>CLASS</b> 601	<b>GROUP ART UNIT</b> 3771	<b>ATTORNEY DOCKET NO.</b> LED-003		
<b>APPLICANTS</b> Jianjun Cui, Shandong, CHINA; <b>** CONTINUING DATA ***** /KCM/</b> This application is a 371 of PCT/CN2004/000355 04/15/2004 <b>** FOREIGN APPLICATIONS *****</b> <del>CHINA 2004200392546 03/16/2004</del> No copy. /KCM/ <b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED *** SMALL ENTITY **</b> 03/26/2008						
Foreign Priority claimed <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No 35 USC 119(a-d) conditions met <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Verified and /KRISTEN CLARETTE Acknowledged MATTER/ Examiner's Signature		<input type="checkbox"/> Met after Allowance Initials	<b>STATE OR COUNTRY</b> CHINA	<b>SHEETS DRAWINGS</b> 1	<b>TOTAL CLAIMS</b> 7	<b>INDEPENDENT CLAIMS</b> 1
<b>ADDRESS</b> Hasse & Nesbitt LLC 8837 Chapel Square Drive Suite C CINCINNATI, OH 45249 UNITED STATES						
<b>TITLE</b> Myopia Therapy Appliance and a Blinder With Said Appliance						
<b>FILING FEE RECEIVED</b> 515	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit			